

must *unite*, for the purpose of returning a certain number of members to the House of Commons, *pledged* to support, watch over, and protect our interests. Had we been thus supported, the late Administration would not have *dared* to disregard our petitions for the redress of our manifold grievances, and our endeavours to procure a wise and efficient measure of medical reform: neither would the despots of Somerset-house have been permitted to libel, plunder, and insult us.

In the course of their inquiries, and in the performance of their duties, your delegates had frequent occasion to deplore the want of union and good faith amongst medical men, and to observe that every advantage has been taken by our enemies of this absence of unanimity. For the future, let it be borne in mind *that where there is no union there can be no strength*: for want of union, we have had to encounter disaster and defeat—for want of union and good faith one towards another, we have entailed deep disgrace and almost irremediable mischief upon ourselves. If we would ultimately prevail—if we would triumph over monopoly—if we would triumph over official impertinence—if we would obtain a triumph for science and humanity—we must be united. But, Gentlemen, victory is not to be achieved without some sacrifices. All party distinctions—all petty jealousies—all personal animosities must be banished from amongst us—then with united heads, united hands, and united hearts, we may bid defiance to the machinations of our enemies.

In conclusion, I would particularly wish to address a few words to the junior members of the profession—to those who, as it is termed, “are about to settle themselves in the world.” Let these young men be careful lest they suffer themselves to become the witless instruments of the designing, the selfish, and the malignant: let them especially beware that they be not persuaded to act towards others as they would not that others should act towards them. In too many instances have they been made tools of under the new poor-law despotism, in order to compel the established and experienced practitioner to enter into injurious and ruinous engagements—they have been the medium through which it has been sought to humble the profession in the dust. Before they lend themselves to purposes so base, let them ask themselves these few simple questions:—Would they, after having by years of industry and honourable competition succeeded in establishing themselves in a comfortable practice, surrounded by their wives and families, with a fair prospect of retiring after a few more years of toil and care from the arduous duties of their profession upon a competency, would they like to have those prospects blighted by having young men thrust into their localities by

poor-law despots and their underlings, and endeavouring to insinuate themselves into their private practice by charging half their prices? What is now the case of the senior practitioner will one day be theirs. Before they stoop to means so abject, purposes so base, let them pause, for by so doing they will but cover themselves with infamy, and heap coals of fire upon their own heads. I have the honour to subscribe myself, Gentlemen, your obedient humble servant,

JAMES BEDINGFIELD, M.D.

Stowmarket, Oct. 8, 1841.

PARTIAL FRACTURE OF THE FEMUR, AND CURVATURE OF THE FOREARM BONES.

To the Editor of THE LANCET.

SIR,—I hope you will insert the following cases, illustrative of partial fracture of the femur, and mere curvature of the radius and ulna, with the accompanying remarks. This is a subject of intrinsic importance to the profession, and in my opinion should be critically discussed and inquired into before bringing it to a conclusion. I remain, Sir, your very obedient servant,

MATTHEW H. GIBSON, Surgeon.

10, Adelphi-street, Glasgow,
Oct. 22, 1841.

CASE 1. *Partial Fracture of Femur.*—James Smith, aged sixteen months, of a thin, weakly, delicate constitution, was brought to me on the 16th of September, 1840. The parents stated the child had been in charge of a young girl, who had let him fall out of her arms on the ground. Upon inspection, I found the thigh-bone, as I thought, *completely* fractured; on a more careful and minute examination, however, I came to the conclusion that the fracture was *incomplete*, in other words, *partial*. My reasons for thinking so were, there were no crepitus, no displacement of the ends of the bones (I may mention here, that to satisfy myself confidently of the fact, an attempt was made to displace the ends of the bones, but I could not without using culpable force), no shortening of the limb; the heel and toes were perpendicularly straight, and the limb could be bent like a hinge, outwards and *inwards*, easily; not so, however, backwards and forwards. On making straight the extremity, it remained so for a little, but on the least movement (for the infant could move it a little) it inclined *inwards*; the limb bent convexly on its outer aspect, the seat of the fracture. Being satisfied as to its nature, I encircled the limb first with a bandage of thin cotton cloth, and laid it in a thick piece

of pasteboard, previously soaked in water, and moulded to the leg, lined with fine carded cotton-wool, enveloping the whole with another bandage. The child, by means of nutritious diet and wine, did well, and could use the limb as well as the other in three or four weeks. In this case the tumefaction was but slight.

CASE 2. *Curvature of Radius and Ulna*.—Peter Simpson, aged six years, slender make, but of a lively nature, was brought to me, 20th of June, 1839, with a broken arm, as his father supposed. On taking a cursory view of the general aspect of the arm, its appearance denoted very great curvature indeed. Making a rigid examination, I could not detect one symptom of fracture, either *partial* or *complete*; an attempt was, therefore, made to straighten it, by a slow and gradual extension, which was effected, not, however, without very great pain. There was some tumefaction. The arm was encircled with a bandage, and a splint applied.

June 26. Bandages became loosened, and finding no pain or inconvenience in the arm, he refused to have the bandages reapplied. The extremity is perfectly straight, and the tumefaction almost gone. A piece of flannel was wrapped about it by the mother, and he was dismissed.

July 12. The mother called upon me to-day with the boy, to ascertain "if anything could be done for Peter's arm, as it was crooked." On looking at it, it presented a very much curved appearance: he has perfect use of the arm, however, and only feels it disagreeable from its shape. Considering that neither *natural* nor artificial means would be of any avail, she was advised not to interfere.

On the recital of these two cases I beg to make a few observations. Dr. Mantell, in your last Number (Oct. 16), in the place allotted to correspondents, appears to have replied to my communication in your former Number, and attempts to confute what I have therein stated. He says that the first case just now cited "was clearly a simple transverse fracture of the femur, with *displacement*;" and, thinking to prove his assertion, he quotes one of the diagnostic symptoms given by me of partial fracture, namely,—"The great facility of bending the bone at that part backwards and forwards, or outwards and inwards, as the fracture may be." Now, I hold, and will still maintain, that in true "partial fracture" that is one of the grand diagnostic symptoms. Why, were it a transverse, complete fracture, you could turn the bone in all directions, and displace the fractured ends too; but not so here: in this case there was no rubbing or crepitus, caused by the ends of the fractured bone; no turning in or out of the toes; no bending backwards or forwards of the limb; there was some movement of the limb; and

it was neither shorter nor longer: in fact, the extremity presented nothing abnormal, further than when the child attempted to move it when crying it got bent, as I had remarked before, by the action of the adductor muscles of the thigh. I have seen a good number of fractures in my day, and from what I have experienced, neither Dr. Mantell nor any one else will convince me to the contrary.

Respecting the second case, of the "perfect devil" (Peter Simpson), I am astonished that Dr. Mantell has so far erred as to think for one moment that that case was one of simple, complete fracture: he might as well say it was compound! Where, in all the world, I would ask, could a boy, and a "perfect devil" to boot, with a completely fractured ulna and radius, use his arm and, in a manner, well, in four or five days? This very circumstance should convince one that it was one of impossibility. A boy, playing about with a broken forearm, and well in a few days! Impossible. To make any further comments on Dr. Mantell's extracts would take up much more space in your Journal than there is any occasion for; suffice it to say, that the cases in full are now before the public—they can judge for themselves.

PARTIAL FRACTURE OF THE RADIUS.

DR. MANTELL'S REPLY.

To the Editor of THE LANCET.

SIR,—Very reluctantly I beg to offer a few remarks in reply to the strictures of Mr. Camden and Mr. Prowse. When these gentlemen have seen a decided case of partial fracture of the radius, they will, I am persuaded, be convinced of the accuracy of my statements, and the propriety of my suggestions: at present they are, according to their own showing, in the condition of Lord Byron's philosopher:—

"Who saw with his own eyes the moon was round;
Was quite as certain that the earth was square:
For he had journey'd fifty miles, and found
No proof that it was circular anywhere!"

They have no right to assume that my remarks referred either to the bending of flexible bones, or to curvature produced by mollities ossium, in a scrofulous monkey! I repeat, that my observations related only to partial fracture of the radius, which, in comparison with complete fracture and mere curvature, is a very rare accident. The object of my communication was to show that when (as is commonly the case) in injuries of this nature the bone is so firmly fixed in a bent position that it cannot be reduced by moderate extension and pressure, it is alike improper and unnecessary to employ such a